

**STORMWATER POLLUTION PREVENTION PLAN  
SITE INSPECTION REPORT**

Inspector's Name: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

Site: \_\_\_\_\_ Watershed: \_\_\_\_\_

Ia. Observations relating to the effectiveness of the best management practices (BMP's):

	Satisfactory	Deficient	N/A
1. Silt fences around stockpiles	_____	_____	_____
2. Silt fences around disturbed areas	_____	_____	_____
3. Location of stockpiles	_____	_____	_____
4. Protective dikes	_____	_____	_____
5. Diversion channels	_____	_____	_____
6. Rock gutters	_____	_____	_____
7. Sediment basins	_____	_____	_____
8. Temporary mulching	_____	_____	_____
9. Seeding/mulching	_____	_____	_____
10. Grass Filter Strips	_____	_____	_____
11. Dust Control	_____	_____	_____
12. Housekeeping	_____	_____	_____
13. Other (list)_____	_____	_____	_____

Ib. Briefly describe deficiency(ies) for each BMP determined to be deficient.  
(Identify by # above. Use other side of form if necessary.)

II. Briefly describe actions required to correct deficiencies found: (Identify by BMP # above if multiple deficiencies. Notify contractor responsible for maintaining BMPs.)

III. Describe actions taken to correct deficiencies: (Identify by BMP #)

IV. List areas where prior land disturbance operations have permanently or temporarily stopped:

INSPECTOR'S SIGNATURE: \_\_\_\_\_

NOTE: Conduct inspection and complete report weekly or within 24 hours after heavy rainfall.

Original copy of this completed form to be kept on file at project office and to become part of Contract Folder. Send one copy of completed form to NRCS State Construction Engineer.